#### **Vaccinations**

- 1) The push-back I get, as a center director, is from those who had COVID. They do not believe they need to be vaccinated. What is your recommendation for these? Get vaccinated?
  - The most effective way to end the COVID-19 pandemic is to get vaccinated. Evidence shows that COVID-19 vaccines are safe and effective at preventing COVID-19, including severe illness and death. COVID-19 vaccines can also reduce the risk of people spreading COVID-19.

Child care programs can promote vaccinations among staff and families, including pregnant women, by providing information about COVID-19 vaccination, encouraging vaccine trust and confidence, and establishing supportive policies and practices that make getting vaccinated as easy and convenient as possible.

- 2) Do they have scientific evidence that this will not cause birth defects or difficulty for young to conceive as they get older? Is this a risk our younger generation wants to take?
  - COVID-19 vaccination is recommended for all people 12 years and older, including people
    who are pregnant, breastfeeding, trying to get pregnant now, or might become pregnant in
    the future.
  - Evidence about the safety and effectiveness of COVID-19 vaccination during pregnancy has been growing. These data suggest that the benefits of receiving a COVID-19 vaccine outweigh any known or potential risks of vaccination during pregnancy.
  - There is currently no evidence that any vaccines, including COVID-19 vaccines, cause fertility problems in women or men.
  - You can use this link (<a href="https://www.cdc.gov/coronavirus/2019-ncov/vaccines/recommendations/pregnancy.html">https://www.cdc.gov/coronavirus/2019-ncov/vaccines/recommendations/pregnancy.html</a>) for more detailed information.
- 3) I have a child who is not vaccinated due to religious exemption and his parents are not vaccinated. I am deeply concerned about this family. What requirements can I legally implement to protect them and my other children in care?
  - Beyond following the recommendations in the <u>ChildCareStrongNC Public Health Toolkit</u>, any question about legal matters should be addressed to whomever you seek legal counsel.

#### Masks

- 4) If these items are that critical (wearing masks, taking temps, etc.) why are they not REQUIRED items now?
  - With the expiration of the Governor's Executive Order, there is no longer a mask mandate for the state of North Carolina. Counties and local municipalities may implement mask requirements which could apply to child care settings as a business entity.
- 5) We have a memo on Guilford County stating that they support recommending "requiring" face coverings where it says "should" in the toolkit. Is it required in our county or not?
  - Counties and local municipalities may implement mask requirements which could apply to child care settings as a business entity.

- 6) The two-year-old mask requirement has our teachers a little concerned. We will have children who are 20 months old and will soon be two years old in a classroom with younger children or older children, when should the transition or introduction of masks occur. We will have a challenge with masks on two years old. A lot of practice and helping them placing them back on. Any advice or guidance is appreciated.
  - You can use these tips and share with families.
    - Masks or Cloth Face Coverings for Children during COVID-19 (from Healthychildren.org)
    - Mask up! Talking to Young Children about Wearing Masks (from Zero to Three)
  - You can read these stories with children.
    - In English:
      - Wearing Masks
      - My Teacher Wears a Mask
    - In Spanish:
      - Usando Mascaras
  - You can share this video with children.
    - Help Stop the Spread of Germs
- 7) What if some kids are masked and some are not? If a kid is unmasked has COVID, will the masked kids still have to be quarantine, or they can they come back after a negative test?
  - This is covered on the top of page 12 of the ChildCareStrongNC Public Health Toolkit.
  - In order for this exception to apply, masks must be consistently worn appropriately and consistently by all children. Since masks are removed for eating and napping, they are not able to be always worn; thus, this quarantine exception does not apply.
- 8) I just want to know do all staff whether vaccinated or not need to wear mask. Is it a requirement or not?
  - It is not a requirement, but NC DHHS strongly recommends that child care programs require all adults and all children ages two years and older wear a face covering at all times when indoors, unless:
    - the person (or family member for a child) states an exemption applies or
    - the person is eating or sleeping.
- 9) One question I had about the requirement for ages 5 and up. In previous guidance, it had 5 years and up requirement on mask wearing. Now the way it is worded, it's a recommendation for 2 and up. Can I have clarification on NC Pre K children who are 5 and school age?
  - It is not a requirement, but NC DHHS strongly recommends that child care programs require all adults and all children ages two years and older wear a face covering at all times, regardless of vaccination status, when indoors, unless:
    - the person (or family member for a child) states an exemption applies or
    - the person is eating or sleeping.

#### 10) Are masks required if you are not vaccinated?

- It is not a requirement, but NC DHHS strongly recommends that child care programs require all adults and all children ages two years and older wear a face covering at all times, regardless of vaccination status, when indoors, unless:
  - the person (or family member for a child) states an exemption applies or
  - the person is eating or sleeping.
- 11) Our county is requiring face masks for school aged students when school starts. We have 2 children who will be attending kindergarten in just a few weeks. Are they (5-year-olds) required to wear masks while in daycare?
  - o That will depend on the policy the child care program implements.
  - It is not a requirement, but NC DHHS strongly recommends that child care programs require all adults and all children ages two years and older wear a face covering at all times when indoors, unless:
    - the person (or family member for a child) states an exemption applies or
    - the person is eating or sleeping.

#### 12) Any suggestions regarding a teacher who refuses to vaccinate or be tested?

- The most effective way to end the COVID-19 pandemic is to get vaccinated. Evidence shows that COVID-19 vaccines are safe and effective at preventing COVID-19, including severe illness and death. COVID-19 vaccines can also reduce the risk of people spreading COVID-19.
- When promoting COVID-19 vaccination, consider that certain communities and groups have been disproportionately affected by COVID-19 illness and severe outcomes, and some communities might have experiences that affect their trust and confidence in the healthcare system. Teachers, staff, and families may differ in their level of vaccine confidence. Child care administrators can adjust their messages to the needs of their families and community and involve trusted community messengers as appropriate, including those on social media, to promote COVID-19 vaccination among people who may be hesitant to receive i

#### **COVID / Symptoms**

- 13) You all mentioned respiratory symptoms. We have children who went to the doctor with fevers, coughs, thick green nose. The doctor does not test for covid, the have been testing for RSV. The kids are positive for RSV, could they also have COVID and testing positive for RSV?
  - Children can have more than one type of virus at a time. NC DHHS/DCDEE suggests
    communicating with parents about the importance of testing to rule out COVID. Encourage
    parents to talk to their child's health care provider about the fact that the child is in child
    care, and the importance of knowing whether these symptoms are of COVID for the facility
    to know how to proceed.

#### 14) Can you tell us how they are able to tell which variation of covid folks have?

Please use this link (<a href="https://www.cdc.gov/coronavirus/2019-ncov/variants/variant.html">https://www.cdc.gov/coronavirus/2019-ncov/variants/variant.html</a>),
 which is to the CDC that provides helpful information.

#### Questions & Answers from the August 6, 2021 Webinar

#### COVID-19 in NC and the ChildCareStrongNC Public Health Toolkit: What You Need to Know

- 15) Does the Delta variant have any new symptoms? Is it best practice to send kids home who have runny noses and coughs?
  - o Refer to pages 9 and 10 of the <a href="ChildCareStrongNC Public Health Toolkit">ChildCareStrongNC Public Health Toolkit</a>.
  - Child care programs should exclude staff and children if the staff member or child has:
    - Fever (temperature of 100.4 degrees Fahrenheit or higher)
    - Chills
    - Shortness of breathing/difficulty breathing
    - New cough
    - New loss of taste or smell
- 16) How do we proceed with teachers that are vaccinated when they have a fever? Do they have to follow the same protocols of unvaccinated people? And if so, is the PCR required?
  - This can be answered on page 12 and 13 of the <u>ChildCareStrongNC Public Health Toolkit</u>.
     Follow the scenarios for "Symptoms".
- 17) Can children not show symptoms?
  - o Children and adults can be asymptomatic and test positive for COVID-19.
- 18) Can children be a carrier of the Delta variant and not show symptoms?
  - Children and adults can be asymptomatic and test positive for COVID-19.

#### **Toolkit**

- 19) The latest version of the Toolkit is August 2, 2021, correct?
  - Yes, the most recent version of the <u>ChildCareStrongNC Public Health Toolkit</u> is dated August 2, 2021.
- 20) I have a question about page 9, under child care programs are required to... Should be last bullet on page read normal pattern and diarrhea? Is it both or should the "and" be "or"?
  - This language is taken directly from child care rule (10A NCAC 09 .0804 INFECTIOUS AND CONTAGIOUS DISEASES and 10A NCAC 09 .1720 MEDICATION REQUIREMENTS). It is both-more than two stools above normal pattern and diarrhea is not contained in the diaper.
- 21) Does not letting any other people in the room include TAs?
  - Per page 7 and 8 of the <u>ChildCareStrongNC Public Health Toolkit</u>, child care programs should allow access for technical assistance providers.
- 22) What about nap time? Masks need to be off, correct? How can we stay safe in an enclosed room?
  - Face coverings should not be worn when sleeping.
  - Consider separating children's naptime mats or cribs and place them so that children are spread out as much as possible and are positioned head to toe for sleeping.
  - See page 18 of the <u>ChildCareStrongNC Public Health Toolkit</u> for information and links to resources on improving ventilation.

### 23) What are the restrictions with religious purposes, holistic lifestyles with no history of sickness, not even a common cold? How do you respect individuals in this situation?

O NC DHHS/DCDEE honors and respects people of all different backgrounds including religious differences and encourages child care providers to do the same. At this time, there are no differences in how the <a href="ChildCareStrongNC Public Health Toolkit">ChildCareStrongNC Public Health Toolkit</a> is applied and implemented. Any question concerning matters that are potentially legal in nature should be addressed to whomever you seek legal counsel.

#### 24) Are parents now allowed to take and get their kids from the classroom?

 Per page 7 of the <u>ChildCareStrongNC Public Health Toolkit</u>, child care programs should allow access for parents/caregivers (to drop off and pick up children).

#### 25) What is the recommendation for bringing parents safely back into the building?

 Per page 7 of the <u>ChildCareStrongNC Public Health Toolkit</u>, it is recommended to utilize prevention strategies, such as masking indoors, to help reduce transmission risk while allowing parents safely back in the building.

### 26) The Toolkit is seemingly different for counties. Why can't there be a toolkit per county to help us out?

- The <u>ChildCareStrongNC Public Health Toolkit</u> is North Carolina's guidance for all child care providers in the state. This Toolkit is based on current COVID-19 trends in the community and updated CDC and AAP guidance focus on preventing the spread and transmission of COVID-19.
- NC DHHS/DCDEE recognizes that COVID-19 looks different in different parts of the state.
   However, it is believed that the strategies given in this Toolkit are the best guidance for everyone and everywhere in the state.

# 27) Are children allowed to use shared materials such as the outside sandbox? What about the soft toys & dress-up clothes?

- Sand play is covered in the ChildCareStrongNC Public Health Toolkit on page 8.
- Cleaning and hygiene are covered on page 16 of the <u>ChildCareStrongNC Public Health</u> Toolkit.
- Water play is covered on page 8 of the <u>ChildCareStrongNC Public Health Toolkit</u>.
- You may need to refer to pre-existing child care and sanitation rules for more details. The local <u>Child Care Health Consultant</u> or environmental health specialist may also be able to help.
- Soft toys and dress-up clothes that can be easily laundered can be used as long as they
  are laundered at least weekly and after being contaminated with oral or
  respiratory secretions.
- Water play, sensory play (such as rice, beans, or playdough activities), and sand play are allowed if physical distancing measures can be maintained. Child care providers should be sure to perform hand hygiene and clean supplies and materials as described in the Cleaning and Hygiene section found on pages 15-16 of the ChildCareStrongNC Public Health Toolkit.

#### 28) Are we allowed to have an air filter in our classroom?

 Page 18 of the <u>ChildCareStrongNC Public Health Toolkit</u> covers "Ventilation and water systems".

# 29) The toolkit says that those exposed can come back after 10 days if they are experiencing no symptoms. The health department says that they have to wait 14 days. Why are the two agencies not aligned?

Please read the whole of page 11 and 12 of the <u>ChildCareStrongNC Public Health Toolkit</u>. The health department ALWAYS makes the final decision about length of isolation and quarantine, based on the individual situation. The "options for reduced quarantine" are NOT for everyone. "CDC has offered options to reduce the duration of quarantine, if the local public health department recommends quarantine and allows reduced quarantine".

#### 30) Are the state rules/guidelines for NC PreK different from what the Toolkit shares?

 The <u>ChildCareStrongNC Public Health Toolkit</u> is North Carolina's guidance for all child care providers in the state; while the <u>StrongSchoolsNC Public Health Toolkit</u> is the guidance document for schools with grades kindergarten through twelfth.

#### **Testing**

#### 31) How do you keep up with staff that is being testing every week?

 The weekly tracking of the COVID-19 testing of child care staff is an individual decision left up to the child care facilities. Currently, there is no formal or structured way for tracking or monitoring this recommendation.

### 32) How should we implement Weekly COVID-19 testing of unvaccinated staff? Though we have over 80% of our faculty vaccinated, we are concerned about the costs and time that this will require.

- When COVID-19 testing is implemented and combined with prevention strategies, it can detect new cases to prevent outbreaks, reduce the risk of further transmission, and protect children, teachers, and staff from COVID-19.
- There are different types of testing. In this instance, screening testing is recommended. Screening testing refers to testing done on someone without symptoms or known close contact with someone with COVID-19. CDC guidance provides that people who are fully vaccinated do not need to participate in screening testing. Screening testing may be most valuable in areas with substantial or high community transmission levels, in areas with low vaccination coverage, and in child care facilities where other prevention strategies are not implemented.
- There are no-cost testing opportunities in all counties in North Carolina. Individuals are encouraged to visit: <a href="https://covid19.ncdhhs.gov/about-covid-19/testing/find-my-testing-place">https://covid19.ncdhhs.gov/about-covid-19/testing/find-my-testing-place</a> to find no-cost testing options in their community.

# 33) Can you speak about the weekly testing for unvaccinated staff? How should we implement that and who is supposed to pay for it?

 There are no-cost testing opportunities in all counties in North Carolina. Individuals are encouraged to visit: <a href="https://covid19.ncdhhs.gov/about-covid-19/testing/find-my-testing-place">https://covid19.ncdhhs.gov/about-covid-19/testing/find-my-testing-place</a> to find no-cost testing options in their community.

#### 34) When does the required of weekly testing become effective?

 As of the August 2, 2021 edition of the <u>ChildCareStrongNC Public Health Toolkit</u>, it is a recommendation that child care programs require staff who are not fully vaccinated to be tested weekly for COVID-19.

### 35) Are centers supposed to cover the cost of weekly testing since they are choosing to not get vaccinated?

 There are no-cost testing opportunities in all counties in North Carolina. Individuals are encouraged to visit: <a href="https://covid19.ncdhhs.gov/about-covid-19/testing/find-my-testing-place">https://covid19.ncdhhs.gov/about-covid-19/testing/find-my-testing-place</a> to find no-cost testing options in their community.

#### 36) I know there is a testing program for K-12. Is there one for child care?

No, there is not a testing program for child care providers currently. There are no-cost testing opportunities in all counties in North Carolina. Individuals are encouraged to visit: <a href="https://covid19.ncdhhs.gov/about-covid-19/testing/find-my-testing-place">https://covid19.ncdhhs.gov/about-covid-19/testing/find-my-testing-place</a> to find no-cost testing options in their community.

# 37) Do these tests still take 24-72 hours to get back? Staffing is hard to come by so being out for days to get results sounds tricky.

 Staff who are undergoing screening testing do not have to be excluded, unless they have symptoms or reason to believe they have been exposed to someone with COVID-19 (both of which would require exclusion).

#### Quarantine

#### 38) How long do we quarantine for? Who goes home if a positive student is quarantined?

- o The local health department will determine the appropriate length of quarantine.
- Anyone who is determined to be a close contact to a person who has tested positive for COVID-19 would need to be excluded and complete a quarantine period as determined by the local health department. Close contact is defined on page 18 of the <a href="ChildCareStrongNC">ChildCareStrongNC</a> Public Health Toolkit.

### 39) We have had a couple of children whose parents have tested positive for COVID. Do the children need to quarantine and if so, for how long?

- This answer is found on page 13 of the <u>ChildCareStrongNC Public Health Toolkit</u>, for the scenario "Household Member, Exposure". The local health department will determine the appropriate length of quarantine.
- 40) Also, we have a student that has not started yet; however just has tested positive for COVID. What is the quarantine time for him?
  - o This answer can be found on page 12 of the <a href="ChildCareStrongNC Public Health Toolkit">ChildCareStrongNC Public Health Toolkit</a> for the scenarios "Diagnosis".

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#### COVID-19 in NC and the ChildCareStrongNC Public Health Toolkit: What You Need to Know

# 41) If a child in your program lives with siblings who have possibly been exposed to covid, does that child have to be excluded from your program for 14 days?

 Unless directed by the health department and as long as the sibling (who was exposed has not tested positive and does not have symptoms), the other sibling does not have to be excluded.

#### 42) Will we still need to quarantine every person who is exposed?

 Child care facilities are required to follow the recommendations of the local public health department if someone at the child care facility has tested positive for COVID-19 or has been exposed to COVID-19. This is required by NC GS § 130A-144.

## 43) If a room is closed by the health department, should the siblings of the closed classroom also be excluded if they test negative?

 Unless directed by the health department and as long as the exposed sibling (in the classroom has not tested positive and does not have symptoms), the unexposed sibling does not have to be excluded.

## 44) Are families required to quarantine or test for COVID-19 if they have travelled out of the country before returning to the center? or is it up to the individual facility?

- Travelers arriving to North Carolina are not required to self-quarantine upon arrival.
   However, self-quarantine for 7 days and viral testing 3-5 days after return are recommended for all unvaccinated travelers in accordance with current CDC guidelines.
- For domestic travel, use this travel planner and follow all <u>state and local</u> recommendations or requirements.
- o If child care facilities choose to require quarantine or testing for families and staff after travel, this should be included in a written policy.

#### 45) Did the requirement to quarantine if exposed expire as well?

 Child care facilities are required to follow the recommendations of the local public health department if someone at the child care facility has tested positive for COVID-19 or has been exposed to COVID-19. This is required by NC GS § 130A-144.

#### **Miscellaneous**

#### 46) Do we still report positive cases to local health department?

 Per page 9 of the <u>ChildCareStrongNC Public Health Toolkit</u>, child care programs are required to immediately notify the local health department if they have reason to suspect that a person within the child care facility has COVID-19. This is required by <u>NC GS § 130A-136</u> and Communicable Disease Rule <u>10A NCAC 41A .0101 (50-52)</u>.

#### 47) Do we still need all the signs posted?

 Per page 8 of the <u>ChildCareStrongNC Public Health Toolkit</u>, child care programs could consider providing physical guides, such as wall signs or tape on floors, to help maintain distance between cohorts in common areas.

#### 48) What was that statement about not writing new policies each month?

- DCDEE recommends discussing any changes in the COVID prevention procedures at each child care facility, as well the reason behind the change(s), with any families served by the facility.
- DCDEE recommends creating a policy document for families that indicates the child care facility is going to follow the guidance in the ChildCareStrongNC Public Health Toolkit.

### 49) Will ECERS be assessing classrooms this year? If we choose to keep our soft toys and items that can't be easily washed up, is that ok?

o In June 2021, the NC Rated License Assessment Project resumed modified environment rating scale assessments for eligible programs using a voluntary temporary assessment process. Preventive strategies included in the Toolkit were taken into consideration when determining the temporary assessment process. Since there are many soft vinyl, cloth, and fabric items that can be cleaned, the usual requirements for soft toys, furnishings, and dress-up clothing still apply. For more information visit NCRLAP's website at www.ncrlap.org.

#### 50) What are the requirements for school buses in child care?

 Page 17 of the <u>ChildCareStrongNC Public Health Toolkit</u> covers the topic of transportation in child care.

### 51) Do or should I say is it ok to accept school-age children. Parents are looking for after school care with school going back in.

 This decision is left up to each individual child care facility. At this time, there is nothing prohibiting a child care provider from accepting school-age children.

### 52) If parents in our program want to reach out to our leaders about changes they'd like to see in the child care industry, who would you recommend they contact?

 NC DHHS/DCDEE encourages parents to contact their local elected officials to advocate for changes they would like to see in the child care industry.